Complete Summary

TITLE

Tobacco: percent of spinal cord injury and disorders (SCI&D) veterans using tobacco who have been offered a referral to smoking cessation specialty program to assist with cessation within the past year.

SOURCE(S)

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percent of spinal cord injury and disorders (SCI&D) veterans using tobacco who have been offered a referral to smoking cessation specialty program to assist with cessation within the past year.

RATIONALE

Approximately one-third of veterans with spinal cord injury and disorders (SCI&D) are current smokers (EPRP fiscal year [FY] 2002-2008) despite the high morbidity and mortality from respiratory complications in this population. The primary objective of this measure is to increase rates of evidence-based interventions to provide tobacco cessation advice, medications, and referrals by providers.

Effective, evidence-based interventions exist for controlling and preventing many chronic diseases. In the case of smoking cessation, there is a large body of evidence providing strong support that counseling and medications are effective in helping smokers quit. Implementing proven clinical smoking cessation interventions would cost an estimated \$2,587 for each year of life saved, the most cost-effective of all clinical preventive services.

PRIMARY CLINICAL COMPONENT

Tobacco use; spinal cord injury and disorders (SCI&D); smoking cessation clinic referral

DENOMINATOR DESCRIPTION

All spinal cord injury and disorders (SCI&D) inpatient and outpatient veterans using tobacco (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Veterans using tobacco who, within the past year, have been offered referral to cessation program (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

External oversight/Veterans Health Administration Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care Hospitals Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Dentists
Nurses
Physician Assistants
Physicians
Psychologists/Non-physician Behavioral Health Clinicians
Social Workers

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See the "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

See the "Rationale" field.

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All spinal cord injury and disorders (SCI&D) inpatient and outpatient veterans using tobacco

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All spinal cord injury and disorders (SCI&D) inpatient and outpatient veterans using tobacco *

Notes:

• If a patient was not screened in the past 12 months and not known to be a lifetime non-tobacco user, or quit greater than 7 years ago, they are presumed to use tobacco and are included in the denominator (count against the facility).

^{*}Eligible veterans: Meets cohort selection criteria and documented in the medical record the patient is currently using tobacco. If the patient's response is vague or ambiguous or documentation is conflicting (tobacco user and non-tobacco user both documented), patient is considered to be using tobacco.

 If conflicting documentation exists as to whether the patient uses tobacco or not, (tobacco user and non-tobacco user both documented), they are presumed to use tobacco.

Exclusions

- Veterans who have reported successfully quitting in the last 12 months
- Has a life expectancy that doesn't lend itself to prevention screening; any of the following exclude the patient from screening for the prevention measures:
 - Documented diagnosis of Cancer of Esophagus, Liver, or Pancreas
 - Enrolled in a VHA or community-based Hospice program
 - Documented in the Medical Record a life expectancy less than 6 months on the PROBLEM LIST or as a Health Factor in Computerized Patient Record System (CPRS)

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition Encounter Institutionalization Patient Characteristic

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Veterans using tobacco who, within the past year, have been offered referral to cessation program*

*Referral to cessation program: Patient may refuse to participate but documentation must indicate that program was offered. This referral should optimally be to inform the patient of services available through a Veterans Affairs (VA) Smoking or Tobacco Use Cessation Specialty Clinic or a VA provider who is the local specialist in evidence-based smoking cessation care, if such a clinic or provider is available to the patient. If the patient cannot or will not attend a VA clinic, or if one is unavailable, the provider can also offer to refer the patient to a local smoking cessation program in the community, such as one available through the American Lung Association, the American Cancer Society, or a state telephone counseling quitline, as appropriate.

Note: Any provider who is able to refer would be able to provide brief counseling and/or refer to a specialty smoking cessation clinic, including physicians, nurse practitioners/physician assistants (NP/PAs), registered nurses (RNs), social workers, psychologists, dentists, substance abuse counselors, and others.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Offered referral to smoking cessation clinic to assist with cessation.

MEASURE COLLECTION

<u>Fiscal Year (FY) 2009: Veterans Health Administration (VHA) Performance</u> <u>Measurement System</u>

MEASURE SET NAME

Performance Measures

MEASURE SUBSET NAME

Tobacco (SCI&D)

DEVELOPER

Veterans Health Administration

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

Unspecified

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Unspecified

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2009 Jan

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

MEASURE AVAILABILITY

The individual measure, "Offered Referral to Smoking Cessation Clinic to Assist with Cessation," is published in "FY 2009, Q2 Technical Manual for the VHA Performance Measurement System."

For more information contact:

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NQMC STATUS

This NQMC summary was completed by ECRI Institute on January 8, 2010. The information was verified by the measure developer on March 22, 2010.

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